

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28774

Entity Name: LEESBURG ART FESTIVAL, INC.**Current Principal Place of Business:**429 W. MAGNOLIA STREET
LEESBURG, FL 34748**Current Mailing Address:**PO BOX 492857
LEESBURG, FL 34749 US**FEI Number:** 59-1830071**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEFANOVIC, MARIA EXECUTIVE DIRECTOR
429 W. MAGNOLIA STREET
LEESBURG, FL 34748 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** MARIA STEFANOVIC

02/08/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title T, VP
Name PECK, CHAD
Address 26057 NEWCOMBE CIRCLE
City-State-Zip: LEESBURG FL 34748

Title PAST PRESIDENT
Name YUTZY, SHARON
Address 1825 MYRTLE LAKE AVE
City-State-Zip: FRUITLAND PARK FL 34731

Title PRESIDENT, PRESIDENT
Name RICHASON, AMIE
Address 33611 STETSON LANE
City-State-Zip: LEESBURG FL 34788

Title SECRETARY
Name BACHMANN, TIM
Address 429 W. MAGNOLIA STREET
City-State-Zip: LEESBURG FL 34748

Title DIRECTOR
Name STEFANOVIC, MARIA
Address 429 W. MAGNOLIA STREET
City-State-Zip: LEESBURG FL 34748

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIA STEFANOVIC

EXECUTIVE DIRECTOR

02/08/2018

Electronic Signature of Signing Officer/Director Detail

Date